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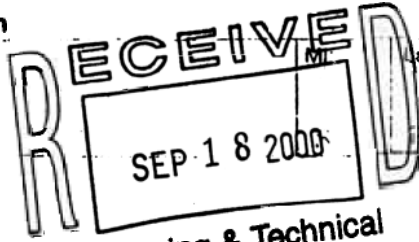
FCC 602
Main FormFCC Ownership Disclosure Information for the
Wireless Telecommunications ServicesApproved by OMB
3060 - 0799
See instructions for
public burden estimate

Applicant/Licensee Information

1) First Name (If individual):

Brian

2) Applicant Name (if mtly):



Last Name

Suffix:

3) Applicant TIN:

Related FCC Regulated Businesses of Applicant/Licensee

4a) Name and address of all FCC Regulated Businesses owned by Applicant/Licensee (use additional sheets, if necessary):	4b) Principal Business:	4c) TIN:	4d) Percent of Interest Held:
Mobile Telephone Service of Wheeling, West Virginia, Inc. 901 Market Street Wheeling, WV 26003	Paging	[REDACTED]	51
Medical Dental Bureau, Inc. d/b/a Bobes Gard Duty 901 Market Street Wheeling, WV 26003	Telephone answering	[REDACTED]	57.45

Signature

5) Typed or Printed Name of Party Authorized to Sign

First Name.

MI: Last Name.

Suffix:

Brian

S. Bobes

Title:

INDIVIDUAL

Signature:

Date:

8/10/00

Failure To Sign This Application May Result In Dismissal Of The Application And Forfeiture Of Any Fees Paid

WILLFUL FALSE STATEMENTS MADE ON THIS FORM OR ANY ATTACHMENTS ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (U.S. Code, Title 18, Section 1001) AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (U.S. Code, Title 47, Section 312(a)(1)). AND/OR FORFEITURE (U.S. Code, Title 47, Section 503).

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ARTHUR BLOOSTON
1914 - 1999

* ADMITTED ONLY IN CALIFORNIA
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September 7, 2000

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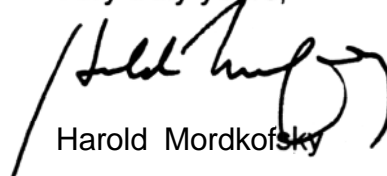
Re: **Brian S. Bobes**
Form 602 FCC Ownership Disclosure Information for the
Wireless Telecommunications Services

Dear FCC Staff:

On behalf of Brian S. Bobes, we are submitting herewith his Form 602 FCC Ownership Disclosure Information for the Wireless Telecommunications Services, in his individual capacity.

Please direct any questions or correspondence regarding this filing to this office.

Very truly yours,


Harold Mordkofsky

Attachment

